

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000032559

FILED
Apr 21, 2009
Secretary of State

Entity Name: EMPIRE PROPERTIES OF TAMPA, INC.

Current Principal Place of Business:

8626 ALEXANDER ARBOR LANE
TEMPLE TERRACE, FL 33637

New Principal Place of Business:

Current Mailing Address:

8626 ALEXANDER ARBOR LANE
TEMPLE TERRACE, FL 33637

New Mailing Address:

FEI Number: 59-3634303

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATKINS, CARL T CPA
5103 MEMORIAL HIGHWAY
TAMPA, FL 33634 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHMIT, JAMES T
Address: 7806 113TH AVE.
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D () Delete
Name: GERHART, STEPHEN
Address: 2018 GREGORY DR.
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCHMIT, JAMES T
Address: 8626 ALEXANDRA ARBOR LANE
City-St-Zip: TAMPA, FL 33637

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES SCHMIT

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

_____ Date